Application or Docket Number

| | С | LAIMS AS | FILED - P | ART I | (Column | 2) | SM/ | ALL ENT | | OR_ | OTH SMA | IER T | ITITY | |
|------------|---|--|-------------------------------------|--|---|--|-----|--|--|--|------------|--|----------------------|--|
| | AL CLAIMS | | 38 | | appropriate and the | ing and the second seco | F | RATE | FEE | - | RAT | | FEE | |
| | | | NUMBER FILED | | NUMBER EXTRA | | ВА | SIC FEE | 375.00 | OR B | ASIC | | 750.00 | |
| OR — | | | 38 minus 20= | | * 18 | | | X\$ 9= | | OR | X\$1 | ~ _L | 324 | |
| | OTAL CHARGEABLE CLAIMS | | 5 minus 3 = | | * 2 | | T | X42= | | OR | X84 | X84= | 168 | |
| | PENDENT CLAI | | <u> </u> | 145 6 | 1 | 一一 | + | +140= | | OR | +28 | 0= | | |
| | | | | | or "O" in col | lumn 2 | L | TOTAL | | OR | TOT | ΓAL | 1242 | |
| lf tl | ne difference ir | | | | | | | IOIAL | | 10 | от | HER | THAN | |
| | CL | AIMS AS | AMENDED | PA! (Col) | R I II umn 2)(| Column 3) | , | SMALL | | OR | SM | ALL E | NTITY | |
| (| | (Column 1) CLAIMS REMAINING AFTER | | HIG NU PRE\ | SHEST IMBER VIOUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RA | ATE | ADDI TIONA FEE | |
| AMENDMEN | | AMENDMENT | Minus | PAI ** | D FOR | = | | X\$ 9= | | OR | X\$ | 518= | | |
| | Total | * | Minus | *** | | = | | X42= | | OR | X | 84= | | |
| Z Z | Independent * INITIALS FIRST PRESENTATION OF MULTIPLE DEF | | PENDE | NT CLAIM | | 1 H | | | 7 | | 200 | ١ | | |
| - | | | | | | | , 1 | ±140= | | OP | +2 | 280= | 1 | |
| | | | | | | | | +140= TOTAL | | OF OF | ` <u>Ł</u> | TOTAL DIT. FEE | | |
| | | | | | · · · · · · · · · · · · · · · · · · · | (Column 3) | | | | OF | ` <u>Ł</u> | TOTAL | | |
| ТВ | | (Column 1 CLAIMS REMAINING AFTER |) | (Co | olumn 2) IIGHEST IUMBER EVIOUSLY | (Column 3) PRESENT EXTRA | | TOTAL | | OF | ADD | TOTAL | ADE | |
| | | (Column 1 CLAIMS REMAINING AFTER AMENDMEN |) | (Co | olumn 2) IIGHEST IUMBER | PRESENT | | TOTAL | ADDI- TIONA FEE | OF | ADD | TOTAL DIT. FEE | ADE | |
| NDMENT | | (Column 1 CLAIMS REMAINING AFTER |) G | (CC) | olumn 2) IIGHEST IUMBER EVIOUSLY PAID FOR | PRESENT EXTRA | | TOTAL ADDIT. FEE RATE | ADDI- TIONA FEE | OF | ADD | TOTAL DIT. FEE | ADE | |
| | Linnenendent | (Column 1 CLAIMS REMAINING AFTER AMENDMEN |) G NT Minus Minus | (CC | Dlumn 2) IIGHEST IUMBER EVIOUSLY PAID FOR | PRESENT EXTRA | | TOTAL ADDIT. FEE RATE X\$ 9= X42= | ADDI- TIONA FEE | OF OF | ADD F | TOTAL OIT. FEE | ADE TION FE | |
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| TAMENDMENT | FIRST PRES | (Column 1 CLAIMS REMAINING AFTER AMENDMEN * * ENTATION OF (Column CLAIMS REMAINING AFTER | Minus Minus Minus Minus Minus Minus | (CO H N PR P ** | Diumn 2) HIGHEST HUMBER EVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER PREVIOUSLY | PRESENT EXTRA = = (Column PRESENT | 3) | TOTAL ADDIT. FEE RATE X\$ 9= X42= +140= | ADDI- TIONA FEE | OF OF O | ADD | TOTAL DIT. FEE RATE (\$18= X84= +280= | ADE TION FE | |
| TAMENDMENT | FIRST PRES | (Column 1 CLAIMS REMAINING AFTER AMENDMEN * * ENTATION OF (Column CLAIMS REMAINING AFTER AMENDMEN | Minus Minus Minus MULTIPLE C | (CO H N PR P ** | Dolumn 2) IIGHEST JUMBER EVIOUSLY AID FOR DENT CLAIM COlumn 2) HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA = = (Column PRESENT | 3) | TOTAL ADDIT. FEE ADDIT. FEE TOT. ADDIT. FI | ADDI- TIONA FEE | OF O | ADD | TOTAL DIT. FEE RATE (\$18= X84= +280= TOT. DDIT. FI | ADE TION FE | |
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^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.